

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

|  |                      |                        |              |
|--|----------------------|------------------------|--------------|
| <h1>TRANSMITTAL FORM</h1> <p><i>(to be used for all correspondence after initial filing)</i></p> | Application Number   | 10/617,489             |              |
|  | Filing Date          | July 10, 2003          |              |
|  | First Named Inventor | Thomas L. CANTOR       |              |
|  | Art Unit             | 1641                   |              |
|  | Examiner Name        | C. Cheu                |              |
| Total Number of Pages in This Submission   | 7                    | Attorney Docket Number | 532212000623 |

**ENCLOSURES (Check all that apply)**

|   |  |   |
|---|--|---|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input checked="" type="checkbox"/> Information Disclosure Statement—Supplemental (3 pages)<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Form PTO/SB/08A/B (2 pages)<br>25 References<br>PTOL-85 Issue Fee Payment (1 page) |
| <div style="border: 1px solid black; padding: 5px; display: inline-block;">Remarks</div> <div style="margin-left: 20px; text-align: center;"> <h2>Customer No. 25225</h2> </div>  |  |   |

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

|              |                         |          |        |
|--------------|-------------------------|----------|--------|
| Firm Name    | MORRISON & FOERSTER LLP |          |        |
| Signature    | /Peng Chen/             |          |        |
| Printed name | Peng Chen               |          |        |
| Date         | June 19, 2009           | Reg. No. | 43,543 |